

Official Policy of Ogden Preparatory Academy

7. Students

7.06.POL Concussion and Traumatic Head Injury Policy

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PURPOSE

The purpose of this policy is to protect the safety and health of Ogden Preparatory Academy (the "School") students. The School recognizes that concussions and head injuries are commonly reported injuries in children and adolescents who participate in sports and other recreational activities. The School acknowledges that the risk of serious injury is significant when a concussion or head injury is not properly evaluated and managed, especially when the individual continues to participate in physical activities after the injury.

Accordingly, the School will comply with the provisions of Utah Code § 26-53-101 through -301 and R277-614 regarding the protection of athletes with head injuries. The school will ensure that concussed students are identified, treated, and referred appropriately.

POLICY

This policy and its requirements apply to students participating in sporting events, as defined in this policy. However, the School shall notify a parent if a student is reported to have experienced a head injury during school hours outside of a sporting event, including a mild bump.

Schools shall provide a written copy of this policy to parents of secondary students participating in extra-curricular activities sponsored by the School or statewide athletic associations and obtain a signed statement from the parent acknowledging that the parent has read, understand, and agrees to abide by the concussion and traumatic head injury policy.

"Sporting events" for purposes of this policy means any of the following athletic activities that is organized, operated, managed, or sponsored by the School (i) a game; (ii) a practice; (iii) a sports camp; (iv) a physical education class; (v) a competition; or (vi) a tryout.

DEFINITIONS

- 1. "Agent" means a coach, teacher, employee, representative, or volunteer.
- 2. "Qualified healthcare provider" means a health care provider who:
 - a. is licensed under Utah Code Title 58, Occupations and Professions; and
 - b. may evaluate and manage a concussion within the healthcare provider's scope of practice.

- 3. "Sporting event" means any of the following athletic activities that is organized, operated, managed, or sponsored by the School:
 - a. a game;
 - b. a practice;
 - c. a sports camp;
 - d. a physical education class;
 - e. a competition; or
 - f. a tryout.

PROCESS

The guidelines and for Agents supervising contests and games includes three steps: RECOGNIZE, REMOVE, REFER. Later, RETURN can be used as appropriate.

RECOGNITION OF A CONCUSSION

A concussion is a type of traumatic brain injury that interferes with normal function of the brain. It occurs when the brain is rocked back and forth or twisted inside the skull as a result of a blow to the head or body. What may appear to be only a mild jolt or blow to the head or body can result in a concussion. A concussion can occur even if a player or student in an activity is not knocked out or does not lose consciousness.

It is the responsibility of the Junior High Principal and Athletic Director to ensure that employees and agents of The School have appropriate training each year about recognizing and responding to concussions and traumatic head injuries, consistent with the employee's/agent's responsibilities for supervising students participating in sporting events and physical education classes.

The following signs and symptoms following a witnessed or suspected blow to the head or body are indicative of probable concussion:

Signs (observed by others):

- Student appears dazed or stunned
- Confusion
- Forgets plays
- Unsure about game, score, opponent
- Moves clumsily (altered coordination)
- Balance problems
- Personality change
- Responds slowly to questions
- Forgets events prior to hit
- Forgets events after the hit

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- Loss of consciousness (any duration)
- Seizures
- Irritability
- Lethargy
- Vomiting
- Dizziness

Symptoms (reported by student):

- Headache
- Fatigue
- Nausea or vomiting
- Double vision, blurry vision
- Sensitive to light or noise
- Feels sluggish
- Feels "foggy"
- Problems concentrating
- Problems remembering

Employees and agents are not expected to be able to diagnose a concussion or traumatic head injury. That is the role of a qualified health care professional. However, employees/agents must be aware of the signs, symptoms, and behaviors of a possible concussion or traumatic head injury, and implement the appropriate protocol as outlined in this policy.

REMOVAL

The School will (a) immediately remove a child from participating in a sporting event of the School if the child exhibits signs, symptoms, or behaviors consistent with a concussion, or is otherwise suspected of sustaining a concussion or a traumatic head injury; and (b) prohibit the child from participating in a sporting event of the School until the child:

- 1. Is evaluated by a qualified healthcare provider who is trained in the evaluation and management of a concussion; and
- 2. Provides the School with a written statement from the qualified health care provider described in Subsection (1)(b)(i) stating that:
 - a. The qualified health care provider has, within three years before the day on which the written statement is made, successfully completed a continuing education course in the evaluation and management of a concussion; and
 - b. The child is cleared to resume participation in the sporting event of the School.

REFER: NOTIFICATION AND TRANSPORTATION

A School agent shall notify the student's parent as soon as reasonably possible of the following:

1. The student has been injured.

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- 2. Depending on the injury, an emergency vehicle will pick the student up at the event and transport him/her or, if the student is symptomatic but stable, the student may be picked up at the event and transported by the parent.
- 3. If the student is transported by the parent, the parent should be advised to contact the student's primary care provider, or seek care at the nearest emergency department, on the day of the injury.
- 4. A medical evaluation by a trained qualified healthcare professional is required before the student will be allowed to participate in any District sporting event.

In the event that a student's parent cannot be reached, and the student is able to be sent home rather than directly to an emergency medical provider, school personnel shall:

- 1. Ensure that the student will be with a responsible adult who is capable of monitoring the student before allowing the student to go home
- 2. Continue efforts to reach the parent
- 3. Not permit the student with a suspected concussion or traumatic head injury to drive home.

REFER: EMERGENCY MEDICAL RESPONSE

The following situations indicate a medical emergency and require an emergency medical response by school personnel in conjunction with parent notification:

- 1. Any student with a witnessed loss of consciousness of any duration should be transported immediately to the nearest emergency department via emergency vehicle.
- 2. Any student who has symptoms of a concussion, and who is not stable (i.e., condition is worsening), should be transported immediately to the nearest emergency department via emergency vehicle.
- 3. A student who exhibits any of the following symptoms should be transported immediately to the nearest emergency department, via emergency vehicle:
 - a. deterioration of neurological function;
 - b. decreasing level of consciousness;
 - c. decrease or irregularity in respirations;
 - d. any signs or symptoms of associated injuries, spine or skull fracture, or bleeding;
 - e. mental status changes: lethargy, difficulty maintaining arousal, confusion, or agitation;
 - f. seizure activity

RETURN TO PLAY

Once full medical clearance is completed (see REMOVAL), the student will be progressed back to full activity following the Step-Wise process. School personnel shall carefully monitor the student's progression through each of the steps.

1. Step 1: Complete cognitive rest. This may include staying home from school or limiting school hours. Activities requiring concentration and attention may worsen symptoms and

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delay recovery. Teachers may be asked to postpone any scheduled assignments or quizzes for a period of time and provide an opportunity to make up the course work.

- 2. Step 2: Return to school full-time.
- 3. Step 3: Light non-impact aerobic activity.
- 4. Step 4: Moderate non-impact aerobic activity.
- 5. Step 5: Non-contact training drills in full equipment. Weight training can begin.
- 6. Step 6: Full contact practice or training.
- 7. Step 7: Full participation.

Progression is individualized and will be determined on a case-by-case basis under the supervision of appropriate school personnel. Factors that may affect the rate of progression include:

- 1. Previous history of concussion or traumatic head injury
- 2. Duration and type of symptoms
- 3. Age of the student
- 4. Whether the activity involves the potential of collision or contact.

The student should spend one to two days at each step before advancing to the next. If post-concussion/traumatic head injury symptoms occur at any step, the student must stop the sporting event and the treating health care provider must be contacted. Depending upon the specific type and severity of the symptoms, the student may be told to rest for 24 hours and then resume activity at a level one step below where he or she was at when the symptoms occurred.

The Step-Wise progression and resumption of sporting activity could be considerably simplified for a student injured during a physical education class for example, as compared to a student injured at an athletic event or formal athletic practice.

<u>Document History</u>

Approved: 08/17/2011

Revised to align with new state requirements and to include the procedure within the policy:

09/09/2021

Legal References

Utah Code § 26-53-101 through -301 Utah Administrative Rule R277-614

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